



Topic Exploration Report

Topic explorations are designed to provide a high-level briefing on new topics submitted for consideration by Health Technology Wales. The main objectives of this report are to:

1. Determine the quantity and quality of evidence available for a technology of interest.
2. Identify any gaps in the evidence/ongoing evidence collection.
3. Inform decisions on topics that warrant fuller assessment by Health Technology Wales.

Topic:	WaitLess app for directing patients to minor injuries care
Topic exploration report number:	TER084

Introduction and aims

WaitLess is a mobile app that is designed to help people who need to access minor injuries care make an informed decision about where to access this care. WaitLess uses waiting time feeds from minor injury units and accident and emergency departments and combines this with up-to-date travel and geolocation information to inform patients about where to go for quickest (in terms of travel time and unit waiting time) treatment.

Health Technology Wales researchers searched for evidence on how the use of WaitLess informs and influences how people access minor injuries care.

Summary of findings

WaitLess is a digital health technology and was determined to be a Tier 2 technology according to the NICE Evidence Standards Framework for Digital Health Technologies. Technologies within this classification help users to understand health living and illnesses but are unlikely to have any measurable user outcomes.

WaitLess is included as a case study within the Evidence Standards. This provides some information about the development and user acceptability of the app, as well as data on its usage, changes in A&E attendance, and predictions about economic implications of deploying WaitLess. No other relevant sources of evidence were identified.

Evidence

Case studies conducted to support the NICE Digital Evidence Standards include some evidence for WaitLess. The authors of these case studies highlight that these are illustrative examples only and not a full evaluation of the technology, and that they are based on information provided by the developer that has not been independently verified.

The case study of the effectiveness of WaitLess included information on its design and development, acceptability with users, and reliability of information in the app. Usage data and data on A&E attendance profiles suggest that use of WaitLess was associated with a reduction in minor injuries activity. The number of A&E attendances, time period of measurement and the geographic area over which the app was used were not reported in the case study.

The case study on the economic impact of WaitLess suggest that using the app can result in cost savings for NHS providers by reducing A&E attendance for minor injuries and redirecting these cases to cheaper centres.

We did not identify any other published evidence about the effect of using WaitLess on outcomes for patients or organisations using the app.

Areas of uncertainty

Evidence in the case studies is taken from a pilot study for which only limited information is available. However, the information available is limited: for example, the time period over which WaitLess has been used, and the absolute change in patterns of use of A&E version other units, is not known.

Initial deployment of WaitLess was in East Kent. It is not known how widespread usage of WaitLess is or whether any care providers in Wales are using the app.

Conclusions

Evidence to support the use of WaitLess is currently available from a single pilot study for which only limited information is available. This suggests the use of WaitLess could help direct people with minor injuries to the most appropriate unit for care, potential reducing waiting times for individual patients and saving costs for providers by reducing pressure on A&E units, but there the limited information available means these conclusions should be interpreted with caution.

Brief literature search results

Resource	Results
HTA organisations	
Healthcare Improvement Scotland:	We did not identify any relevant guidance from this source.
Health Technology Assessment Group	We did not identify any relevant guidance from this source.
Health Information and Quality Authority	We did not identify any relevant guidance from this source.
UK guidelines and guidance	
SIGN	We did not identify any relevant guidance from this source.
NICE	York Health Economics Consortium on behalf of NICE. Examples of effectiveness and economic digital health case studies. February 2019. https://www.nice.org.uk/Media/Default/About/what-we-do/our-programmes/evidence-standards-framework/evidence-case-studies.pdf
Secondary literature and economic evaluations	
ECRI	We did not identify any relevant guidance from this source.
Cochrane library	We did not identify any relevant secondary evidence from this source.
Medline	We did not identify any relevant secondary evidence from this source.
Primary studies	
Medline	We did not identify any relevant primary studies from this source.
Cochrane library	We did not identify any relevant primary studies from this source.
Date of search: October 2019	
Concepts used: Waitless, Transforming Systems	